



ADMINISTRATIVE POLICIES  
AND PROCEDURES  
State of Tennessee  
Department of Correction

Index # 506.21

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Approved by:

Subject: INMATE DRUG/ALCOHOL TESTING AND SANCTIONS

- I. AUTHORITY: T.C.A. 4-3-603, T.C.A. 4-3-606, T.C.A. 41-1-120, T.C.A. 41-21-237.
- II. PURPOSE: To uphold the safety and security of the correctional environment by specifying the conditions and procedures for conducting urinalysis testing of inmates.
- III. APPLICATION: All institutional staff and inmates, and employees and inmates of privately managed institutions.
- IV. DEFINITIONS:
  - A. Alternative Drug Testing Kit: Device used to detect the presence or absence of illegal drugs and drug metabolites.
  - B. Confirmation Test: A test to corroborate the result of the first test through the use of a second methodology.
  - C. Drugs of Abuse Sweat Patch: Device used to detect the presence or absence of illegal drugs and drug metabolites by acting as a collector for non-volatile components of sweat.
  - D. Drug Testing Coordinator: An individual designated by the warden to direct and monitor all necessary duties relating to inmate drug testing.
  - E. Ion Trap Mobility Spectrometer: Electronic device used to trap traces of vapors or particles given off or left behind by narcotics by ionizing the target vapors and then subsequently measuring the mobility of the ions in an electric field.
  - F. Laboratory Drug Screen: A controlled laboratory test conducted to detect the usage (inhalation, ingestion, injection) of illegal drugs or alcohol detectable in the subject's system.
  - G. On-Site Drug Screen: Preliminary analytical testing procedure done at the institution to detect the presence or absence of alcohol in urine or saliva or illegal drugs or their metabolites in urine.
  - H. Random Selection: A sample drawn from the inmate population so that each member of the population has an equal chance to be selected.
  - I. Reasonable Suspicion: Knowledge sufficient under the circumstances to cause an ordinarily prudent and cautious person to believe someone has consumed illegal drugs or alcohol.

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- J. Saturation Testing: Urinalysis testing that includes a representative sampling of each institution's in-house population.
- K. Substance Abuse Treatment Program: Formal organized behavioral therapies such as individual or group counseling, cognitive skills therapy, or psychotherapy for inmates who have abused alcohol and other drugs. These services are designed to eliminate specific physical, mental, or social dependencies on mood altering substances.
- L. Urinalysis Testing: The process of conducting a chemical analysis of urine to detect the presence or absence of alcohol or illegal drugs or their metabolites.
- V. POLICY: The Tennessee Department of Correction (TDOC) is committed to a policy of zero tolerance of inmate drug/alcohol use within state correctional facilities. The TDOC shall operate a urinalysis testing program based on drug/alcohol testing, graduated sanctions, and treatment interventions that deter the use of illegal drugs and alcohol by inmates.
- VI. PROCEDURES:
  - A. Authority to Conduct Drug Testing:
    - 1. All adult inmates incarcerated in a state operated or state funded correctional facility shall be subject to drug/alcohol testing at any time during their incarceration. This policy provides for nondiscrimination on the basis of race, religion, national origin, creed, sex, age, or disability.
    - 2. Urinalysis testing shall be used as the primary means to detect and deter illegal substance abuse within state correctional facilities and determine treatment needs of inmates. Urinalysis testing will not be used for harassment of inmates.
    - 3. The following personnel within the TDOC can request inmate urinalysis testing:
      - a. Commissioner or designee
      - b. Deputy Commissioner
      - c. Assistant Commissioner of Operations
      - d. Warden
      - e. Deputy Warden/AWO
      - f. Director of Substance Abuse Programs
      - g. Unit Manager
      - h. Substance Abuse Program Counselor

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- i. Shift Commander
  - j. Drug Testing Coordinator.
- 4. The warden shall ensure that inmates are notified in writing (inmate orientation manual, posted notices, etc.) of the TDOC's policy on zero tolerance of drug use within state correctional institutions, that inmates are subject to drug or alcohol testing during their incarceration, and that inmates are subject to disciplinary action for the following:
  - a. Failure to submit to testing or to provide a urine sample within two (2) hours of the request;
  - b. Tampering or attempting to tamper with the specimen or test results; or
  - c. Receiving a positive test result for which there is no satisfactory explanation.
- 5. Only alcohol and drug kits on the statewide contract that have been approved for on-site drug and alcohol testing shall be used to conduct on-site urinalysis testing.
  - a. Urinalysis kits shall be used to test for the active ingredients found in THC (marijuana), amphetamines, methamphetamine, barbiturates, opiates (morphine), benzodiazepines, cocaine, methadone, and oxycodone.
  - b. All positive on-site drug test results shall be confirmed through a state approved contract laboratory.
  - c. Any negative on-site drug test result which is deemed suspect may, with the written approval of the warden/designee, be forwarded to the state approved contract laboratory for further analysis. Reasons for suspecting the negative field test result is invalid shall be cited in the warden's/designee's approval memorandum and in the comments field on TOMIS conversation LIBS. These specimens shall be handled and forwarded for contract laboratory analysis in the same manner as positive field test specimens.
  - d. A second on-site alcohol test shall be used to confirm positive alcohol tests.
- 6. The warden/designee may further test for other drugs of abuse at his/her discretion.
- 7. The following are examples of when an inmate may be subject to urinalysis testing for other than reasonable suspicion, which is addressed in Section VI.(A)(8):
  - a. As part of the monthly drug testing program, each institution's population shall be randomly selected for drug testing.

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- (1) At a minimum, each correctional facility shall test ten (10) percent of the institution's in-house inmate population each month. Each institution housing adult inmates (boot camp, technical violator program, therapeutic community see Section VI.(A)(7)(b) below) shall be provided with a computer-generated, randomly selected list of inmates to be tested every thirty (30) days. This list will be made available no later than the tenth (10th) day of each month. Actual monthly test dates shall be at irregular intervals, shall include both weekdays and weekends, and should occur on all three shifts during the month.
  - (2) Random drug screens conducted on a monthly basis shall include a single test for one or a combination of the following drugs: marijuana, cocaine, opiates, methamphetamine, amphetamines, or barbiturates. Additional substances may be tested for at the discretion of the warden/designee.
- b. Upon initial admission to a TDOC classification center or upon admission to a specialized correctional facility (boot camp, therapeutic community, technical violators program), inmates shall receive an on-site drug screen.
  - (1) The warden at the respective classification center or specialized correctional facility shall be responsible for designating the appropriate staff to conduct on-site drug screening during initial classification.
  - (2) All inmates entering a classification center or specialized correctional facility shall be tested for the presence or absence of the following drugs: THC (marijuana), cocaine, barbiturates, methamphetamine, amphetamines, and opiates.
  - (3) The test results shall be recorded in the inmate's medical record. No sanctions shall be issued for testing positive on an initial classification drug screen.
- c. In addition to conducting monthly random drug screening, special alternative incarceration units (boot camp, technical violator program, therapeutic community) shall conduct, at a minimum, an initial urinalysis test on each inmate entering the program, one urinalysis test during their stay at the unit, and one urinalysis test prior to release from the unit.
- d. Any time an inmate is involved in an altercation, stabbing, etc., a drug screen may be conducted.
- e. Inmates returning from furlough, work release, or community work assignment with access to or potential contact with contraband, drugs, and/or alcohol may be subject to an on-site drug or alcohol screen.

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- f. Any time a canine unit or narcotic detection instrument indicates the presence of drugs during a search of inmates in the housing unit or work area, a drug screen shall be conducted.
  - g. Inmates who have been selected for pre-release or work release placement shall submit to a drug screen prior to the reclassification hearing and again in 30-45 days if the transfer has not occurred. All such inmates shall be subject to re-testing after arrival at the pre-release or work release program.
  - h. Urinalysis testing may be conducted prior to and after an inmate participates in an institutional visit.
- 8. Reasonable suspicion drug or alcohol screening:
  - a. Reasonable suspicion drug or alcohol screening may be conducted based upon circumstances arising from one or more of the following:
    - (1) Confidential information from a reliable source
    - (2) Observed unusual actions or behavior by the inmate
    - (3) Suspected intoxication of an inmate
    - (4) Discovery of drug paraphernalia or evidence that alcohol/drugs have been used
    - (5) Positive indication from a narcotic detection instrument.
  - b. Reasonable suspicion drug or alcohol screens shall require the approval of the warden/designee.
  - c. Any time reasonable suspicion alcohol screens are conducted, a second on-site alcohol test shall be conducted to confirm the positive test.
- 9. As a means to establish a systemized baseline, unannounced saturation testing may also be conducted on an annual basis or on an as-needed basis.
- 10. In addition to random drug screens, all inmates assigned to a substance abuse program shall receive, at a minimum, one on-site drug screen every three (3) months as a condition of the treatment program. All inmates assigned to a substance abuse program shall receive an initial on-site urinalysis test upon admission into the program and as a condition of release from the treatment program.

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11. All inmates being considered for release on parole supervision shall receive an on-site drug screen within thirty (30) days prior to their parole hearing and a minimum of one (1) on-site drug screen within the thirty (30) day period prior to release from the institution. The test results shall be reported to the institutional parole officer (IPO). Inmates participating in a substance abuse treatment program must sign CR-1885 (Authorization for Release of Health Care/Substance Abuse Treatment Information) prior to test results being reported to the Board of Probation and Parole.
12. Prior to determinate release on probation, inmates shall receive an on-site drug screen within thirty (30) days of their scheduled release.
13. Inmates suspected of being either intoxicated or under the influence of drugs or alcohol shall be examined by a member of the health care staff to ensure the safety of the inmate. Following the examination and on-site urinalysis test, appropriate treatment and medical observation shall be provided as needed.

B. Collection of Sample:

1. The Director of Substance Abuse Programs shall be responsible for coordinating all drug testing activities for the department.
2. Each institution shall appoint a drug testing coordinator to be responsible for the coordination, monitoring, and service provision of the drug testing program within their respective institution. The coordinator shall report any program deficiencies to the warden/designee for resolution.
3. Before collecting the test sample, the designated staff shall positively identify the inmate by name and TOMIS identification number.
4. The designated staff shall examine the inmate's arms and hands, especially under the fingernails, before observing the specimen collection to ensure that the inmate does not have any foreign substances that could be used to adulterate the specimen. The inmate may be requested to wear gloves when providing a urine specimen.
5. The collection of the urine sample shall take place in a designated area that does not permit the inmate to come in contact with any person other than one (1) staff member assigned to observe the collection, and one (1) staff member assigned to witness the chain of custody process. The collection of the urine sample shall be observed only by one (1) trained staff member of the same gender, unless there is a legitimate security need for the presence of additional staff. The inmate shall be instructed to position himself or herself in a manner that allows the staff member unobstructed observation of the urine voiding process. All inmates shall be required to wash, rinse, and thoroughly dry their hands prior to and after the collection of the sample.

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6. Failure to comply with the above collection procedures shall not be considered a reason for dismissing test results
7. Collection staff shall ensure that the collection site is clean and all potential contaminants are removed from the collection area.
8. The designated staff shall provide the inmate with a clear (when available), non-reusable container for the collection of the urine specimen.
9. The inmate must provide the urine sample within a reasonable time (2 hours after entering testing area). Refusal to provide the urine sample is grounds for an immediate disciplinary report. Inmates may be given up to eight (8) ounces of water to assist in specimen production. At his/her discretion, the warden may temporarily house inmates who are unable to void after the above waiting time in a "dry room" for up to twenty-four (24) additional hours or until a urine sample is obtained, subject to the following conditions (See Policy #506.06.):
  - a. Confinement is ordered by the warden/designee.
  - b. The room of confinement is thoroughly searched prior to placement of the inmate.
  - c. The inmate is provided with toilet articles and a means of collecting body excretions.
  - d. The inmate remains under intermittent observation by staff.
  - e. The inmate may be given up to eight (8) ounces of water every four (4) hours, not to exceed a total of thirty-two (32) ounces of water within a twenty-four (24) hour period to assist in specimen production.
10. There may be extenuating medical conditions (e.g., dehydration, kidney problems, medication, etc.) that may preclude the giving of a sample. In such cases, the inmate must provide written evidence from the health care staff indicating such a condition. At his/her discretion, the warden may, in extreme cases, authorize the use of an alternative drug testing kit (if available) for those inmates who have a documented medical condition that would prohibit the use of urinalysis testing. Approval of the commissioner or his designee is required prior to the use of any alternate drug testing method or instrument.
11. Inmates are responsible for informing the collection staff if they are taking any medication. The use of medically approved prescribed medication that would cause a positive test result shall be verified by the collection staff through the medical staff and recorded in the inmate's medical file.
12. Any inmate found attempting to alter, contaminate, or adulterate the sample in any way shall be cited with a disciplinary report.

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C. Testing Procedures:

1. Collection staff shall exercise universal precautions (gloves) when handling urine specimens.
2. Each specimen collected for urinalysis testing shall be tested at the institution by trained staff designated by the warden, using kits designed for on-site testing. Prior to using test kits, expiration dates will be checked. Reagents/tests will not be used beyond their expiration dates. When a full screen is being done, a field test is not required.
3. All positive urine specimens shall be forwarded to the clinical laboratory for analysis and confirmed through gas chromatography mass spectrometry (GC/MS).
4. Specimens collected for alcohol testing shall be collected and tested at the institution by trained staff designated by the warden, using field testing equipment designed for the detection of alcohol.
5. Collection staff shall immediately dispose of negative specimen containers after testing has been completed according to the following procedures:
  - a. Urine is to be emptied in toilet receptacle.
  - b. Plastic specimen containers will be disposed of in a lined trash receptacle or a trash bag. The trash receptacle shall have a lid cover for cleanliness and hygiene.
  - c. Trash bags containing drug testing specimen collection cups shall be tied securely and left in a trash receptacle for disposal.
  - d. The collection area shall be cleaned thoroughly when all testing is complete.
  - e. The collection staff shall wash their hands with soap and water after handling urine specimens.
  - f. Specimen containers will not be reused for another urine sample.
6. The testing of urine specimens at the institution by a field test kit is done solely as a means of minimizing the cost of unnecessary laboratory testing, and the failure to conduct a field test at the institution in and of itself does not require the dismissal of a disciplinary report resulting from a positive laboratory test.
7. Alternative drug testing procedures shall be conducted in accordance with manufacturer's training manual instructions. A user's manual shall be available at each institution (when applicable).



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D. Chain of Custody:

1. All specimens forwarded to the clinical laboratory for drug testing and confirmation shall be submitted in accordance with procedures recommended by the laboratory. A chain of custody form, as provided by the clinical laboratory, shall be completed on specimens forwarded to the clinical laboratory.
2. The collection staff shall ensure that all shaded areas on the chain of custody form are completed in accordance with the clinical laboratory's specifications. The chain of custody form shall include the inmate's TOMIS identification number, reason for the test, specimen type, specimen temperature, and the date and time of collection.
3. When the sample is collected, the staff member who receives the specimen from the inmate shall be responsible for:
  - a. Sealing the specimen collection container.
  - b. Placing the primary tamper seal label with barcode across the top of the specimen collection container. The label must match the barcode on the chain of custody form.
  - c. Placing the specimen container in the specimen collection bag.
  - d. Sealing the specimen collection bag with the secondary tamper seal.
  - e. Completing the chain of custody form.
4. The collection staff shall seal the specimen container under observation of the inmate. The inmate shall sign the laboratory chain of custody form and initial the specimen tamper seals, along with the staff member. If an inmate refuses to sign the chain of custody form or initial the specimen tamper seal, he/she shall be charged with "Refusing Drug Screen" and assessed a fee of \$25.00. Visitation privileges shall be suspended.
5. The collection staff member shall transport the sealed specimen to the specimen holding area.
6. The number of staff handling the specimen shall be kept to the minimum to maintain the integrity of what may become evidence in a disciplinary proceeding. A log book shall be kept in the vicinity of the refrigerator/freezer, and each person who accesses it shall note his/her name, rank, date, time, and reason for access.
7. Specimens shall be stored in a secured location until such time as it is turned over to the appropriate lab personnel for testing.
8. Test specimens and test kits shall be secured with a lock when the test area is not in use.

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9. Specimens shall be transported to the laboratory within seventy-two (72) hours of collection (or other time period acceptable by the clinical laboratory). When specimens cannot be transported within 24 hours, they shall be frozen and placed in a locked freezer until they can be transported to the laboratory.
10. The clinical laboratory shall retain, freeze, and place all positive specimens in a properly secured long-term storage for a period of 12 months. Specimens shall be destroyed by the clinical laboratory in accordance with Substance Abuse Mental Health Services Administration (SAMHSA) standards.
11. Urine specimens forwarded to the laboratory shall be rejected and therefore cannot be analyzed if any of the following procedural errors are identified:
  - a. Specimen container seal is broken/tampered.
  - b. There is less than 20 ml of specimen.
  - c. The primary tamper seal is missing.
  - d. Specimen identification number on specimen container and chain of custody form do not match.
  - e. Specimen shows obvious adulteration (color, odor, foreign objects, etc.).
12. When the specimen is rejected, the clinical laboratory shall notify the submitting location with the reason for the rejection, in writing.
13. Alternative drug testing kits forwarded to the laboratory for analysis shall comply with the following:
  - a. Must be accompanied by a chain of custody form.
  - b. Must be placed in a specimen bag and sealed.
  - c. A barcode label from the chain of custody form must be fixed to the specimen bag and the label must match the barcode labels on the chain of custody form.
  - d. The security seal from the chain of custody form must be fixed to the specimen bag.
14. The collection staff shall seal the specimen container under observation of the inmate. The inmate shall sign the laboratory chain of custody form and initial the specimen tamper seals, along with the staff member. If an inmate refuses to sign the chain of custody form or initial the specimen tamper seal, he/she shall be charged with "Refusing Drug Screen" and assess a fee of \$25.00. Visitation privileges shall be suspended.

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15. Failure to comply with the above procedures shall not constitute a reason for the dismissal of test results.

E. Reporting of Results:

1. A drug screen profile of each test sample submitted to the clinical laboratory for analysis shall be prepared by the clinical laboratory, indicating either positive or negative results, and returned to the designated institutional contact. The laboratory profile shall contain the following information:
  - a. Name and Address of Clinical Laboratory
  - b. Account Number
  - c. Reason for Test
  - d. Specimen/Donor Identification Number
  - e. Name of Receiving Institution
  - f. Name of Institutional Contact
  - g. Collection Date
  - h. Date Received from Institution
  - i. Date Reported to the Institution
  - j. Test Methods by Drug Class and Detection Levels (initial and confirmation)
  - k. Profile Results by Class and Confirmation Detection Levels
  - l. Name of Certifying Authority
  - m. Date of Certification
2. All drug screen profiles shall include the following statement "Positive results are reported only after confirmation by Gas Chromatography/Mass Spectrometry".
3. A positive result of one or more of the categories of drugs of abuse screening indicates the individual is taking illegal medication, if a legal prescription has not been issued.
4. The institutional drug testing coordinator shall maintain a copy of all positive confirmation test results and a copy of the chain of custody form from the laboratory in a confidential file.
5. The results of each clinical laboratory examination shall be final and shall be grounds for disciplinary action in instances of positive reports.
6. Disciplinary action shall be handled in accordance with Policy #502.01 (and #9502.01 for privately managed facilities.)
7. The warden/designee shall notify the Board of Probation and Parole and institutional parole officer (IPO), through TOMIS, of inmates that test positive for drug/alcohol use when the inmate has a pending parole hearing, has had a hearing and a parole decision is pending, or parole has been granted. The drug testing coordinator shall forward copies of all drug testing supporting documentation, including laboratory test results, to the IPO.

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8. All drug test results, positive or negative, of inmates assigned to a substance abuse treatment program or drug education group shall be considered confidential and not entered on TOMIS. A range of graduated disciplinary sanctions, up to termination from treatment, shall be used within the substance abuse treatment program for positive drug test results. The drug test results of inmates assigned to a drug treatment program shall be placed in the inmate's substance abuse treatment program file.
9. Participation in a substance abuse program does not exclude an inmate from being selected for or participating in the institutional random drug testing program. Drug test results of inmates assigned to a substance abuse program shall not be entered on TOMIS or in the inmate's institutional record.
10. When an inmate not assigned to a substance abuse program undergoes a drug screen, the results of the field and confirmation tests (positive and negative) shall immediately, upon receipt of the test results, be placed on TOMIS conversation LIBS, Drug Audit Results, Detail Screen.

F. Staff Training:

1. All staff involved in the collection, documenting, transport, or other handling of urine specimens shall receive training on inmate drug testing procedures and sanctions. Documentation of staff training will be placed in staff's training files.
2. The drug testing coordinator shall be responsible for training staff involved in specimen collection and chain of custody procedures.
3. Each institution shall designate and train a staff member to serve as back up for the drug testing coordinator in his/her absence.

G. Treatment Services:

1. Within the limitations imposed by available resources, the department shall provide an opportunity for inmates who test positive for drug use while incarcerated to receive substance abuse programming services in accordance with Policy #113.95.
2. The primary goal of the substance abuse program shall be to reduce the rate of recidivism by providing treatment and programming services within the constraints of a correctional environment that meet the varying individual treatment needs of inmates.
3. The secondary treatment goals shall include:
  - a. To provide linkage between the institution and community treatment services.

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- b. To reduce the level of criminal activities and drug use among incarcerated and post-incarceration offenders.
4. Substance abuse services shall be designed to provide a continuum of programming options throughout incarceration and parole supervision.
5. Each institution shall designate a staff person to coordinate all substance abuse treatment/programming activities within the institution.
6. Criteria for admission to the substance abuse program shall be clearly written and available to inmates and institutional staff. Inmates may be accepted into a substance abuse program based on any of the following criteria:
  - a. Positive drug screen while incarcerated
  - b. Technical parole violator - positive drug screen
  - c. Documented history of substance abuse or use
  - d. Voluntary agreement to participate and follow program rules including regular and random urinalysis testing.
7. Substance abuse treatment staff shall conduct an individual assessment and comprehensive clinical interview on all inmates accepted for substance abuse treatment services to determine addiction severity, treatment needs, preferences, and the most appropriate treatment intervention.
8. All inmates participating in a substance abuse treatment program shall sign a CR-1885 (Authorization for Release of Health Care/Substance Abuse Treatment Information) authorizing substance abuse treatment information be provided to the Board of Probation and Parole as a condition of acceptance into the program.
9. The department shall provide training in substance abuse issues to appropriate treatment and security staff.
10. The following substance abuse program options shall be available for inmates that test positive on a drug screen or inmates that are in need of substance abuse treatment/programming services (See Policy #113.95.):
  - a. Self-Help and Fellowship Meetings (NA, AA, CA, etc.): Self-help meetings provided by the institution volunteer program shall be offered at all institutions for inmates who are in need of these services. Self-help services shall be offered on a voluntary basis. The warden shall designate an institutional staff position that will be responsible for coordinating all volunteer self-help services.

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- b. Drug Awareness: All inmates that test positive on a drug screen shall be encouraged to attend a drug awareness program. This program shall be offered on a voluntary basis in the evenings, on weekends, or at various times that do not interfere with the inmates' job assignments at all institutions. Inmates may be referred to the drug awareness program by the institutional counselor, institutional parole officer, disciplinary board, or an inmate may volunteer to participate.
- c. Drug Education: Drug education shall be offered at all time building facilities. Drug education shall include lecture and didactic group counseling sessions. Inmates may be referred to drug education by their institutional counselor, institutional parole officer, disciplinary board, or may volunteer to participate.
- d. Group Counseling Services: All substance abuse group counseling treatment services shall be provided by licensed alcohol and drug counselors or correctional counselors who have been trained in a particular treatment modality. Inmates may be referred to group counseling by the institutional counselor, institutional parole officer, disciplinary board, or may volunteer to participate.
- e. Individual Counseling Services: Individual counseling shall be offered at selected institutions. Only licensed alcohol and drug counselors shall provide individual substance abuse counseling services. Inmates may request, through the institutional counselor, individual substance abuse counseling.
- f. Cognitive Skills Development Group Counseling Services: All cognitive skills programming services shall be provided by trained/certified instructors. Inmates may be referred to cognitive skills by the institutional counselor, institutional parole officer, disciplinary board, or may volunteer to attend.
- g. Therapeutic Community: Therapeutic substance abuse treatment services shall be available for both male and female inmates. Programming services shall include community service work, if available, cognitive skills development, individual/group counseling, and academic/vocational services. Participation shall be on a voluntary basis. Inmates may be referred to the therapeutic community program by their institutional counselor, institutional parole officer, or may volunteer to attend.
- h. Transitional Release Programming: Transitional release services shall be offered to inmates preparing for institutional release. This program shall be designed to focus on transitional issues and relapse prevention. This program shall be available for inmates assigned to the institution's pre-release program. Pre-release programs are available to all inmates preparing for release.

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- i. Community Release Outpatient Treatment: Where available, this program shall be designed to provide aftercare or outpatient treatment services for male and female parolees. The institutional parole officer may recommend outpatient treatment as a condition of the inmate's release or the parolee may volunteer to attend.

H. Sanctions:

1. In all instances where an inmate is convicted of the charges of Drug-Possession (DPO), Drug-Selling (DRS), Intoxicated-Drugs (IDR), Positive Drug Screen (PDR), Drug Paraphernalia (DRP), Refusal of a Drug/Alcohol Screen (RDR), Intoxicants-Possession (IPO), Intoxicated-Alcohol (IAL), Intoxicants-Use (IUS), or Inhalants (INH), Conspiracy to Violate State Law (CVS) when drug related, or the inmate is in possession of or has ingested any controlled drug not specifically prescribed, or the inmate is found attempting to alter, contaminate, or adulterate the test sample in any way, in addition to appropriate disciplinary sanctions (See Policy #502.02 and #9502.02 for privately managed institutions.), the warden shall modify the inmate's visitation according to the following:
  - a. First Offense - Visitation shall be suspended for six (6) months.
  - b. Second Offense (within eighteen (18) months of first offense) – Visitation shall be suspended for one (1) year. A second offense more than 18 months from the first offense shall result in suspension of visitation for six (6) months.
  - c. Third and subsequent offenses (within twenty-four (24) months of the first offense) – Visitation shall be suspended for one (1) year.
  - d. Attorney and minister visitation are not affected by this section.
2. Inmates who refuse to provide a specimen, attempt to adulterate, or alter a drug screen shall be charged with the disciplinary infraction "Refusal of a Drug/Alcohol Screen". Such refusal shall be considered a Class B offense, and the inmate shall be assessed a fee of \$25.00. Visitation privileges shall be suspended in accordance with Section VI. (H)(1)(a-c), and inmates shall submit to mandatory monthly drug testing for a period of three consecutive months.
3. Inmates convicted of a positive drug test, after the positive confirmation test, shall be required to incur the cost of the confirmation. Visitation privileges shall be suspended in accordance with Section VI. (H)(1)(a.-c). Inmates shall also submit to mandatory monthly drug testing for a period of three (3) consecutive months.
4. In addition to #1 through #3 above, any one or a combination of the following escalating sanctions for convictions on drug related charges may be imposed:

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- a. First Offense
    - (1) Referral to individual counseling sessions (bi-weekly) with substance abuse program staff
    - (2) Recommended participation in a drug awareness program
    - (3) No packages for six (6) consecutive months
    - (4) Referral to institutional substance abuse program
    - (5) Punitive segregation for five (5) days.
  - b. Second Offense (within eighteen (18) months of first offense). All sanctions for the second offense shall run consecutively to any similar sanction for the first offense.
    - (1) Mandatory monthly drug testing for a period of six (6) months
    - (2) Punitive segregation for ten (10) days
    - (3) No packages for nine (9) consecutive months
    - (4) Loss of audio/visual equipment for six (6) months
    - (5) Loss of sentence credits as per Policy #502.02 and #9502.02 for privately managed facilities.
  - c. Third and Subsequent Offenses (within twenty-four (24) months of the first offense. All sanctions for the third or subsequent offenses shall run consecutively to any similar sanction for the second offense.
    - (1) Punitive segregation for thirty (30) days
    - (2) Mandatory monthly drug testing for nine (9) months
    - (3) No packages for twelve (12) consecutive months
    - (4) Loss of audio/visual equipment for twelve (12) months
    - (5) Loss of sentence credits per Policy #502.02 and #9502.02 for privately managed facilities.
5. Inmates assigned to a substance abuse treatment program who test positive on a drug or alcohol screen, after the confirmation test, shall be required to incur the cost of the confirmation test, submit to monthly drug screens for the duration of their treatment program, and their visitation privileges shall be suspended. If the



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inmate refuses to provide a specimen, initial the specimen tamper seal, sign the chain-of-custody form, or attempt to adulterate or alter a drug screen, he/she shall be cited with a disciplinary for "Refusal of a Drug/Alcohol Screen", visitation privileges shall be suspended, inmate shall submit to monthly drug screens, and the inmate shall be assessed a fee of \$25.00. Treatment staff shall use escalating treatment sanctions as a means to hold offenders accountable for their actions. Treatment sanctions shall include any one or a combination of the following:

- a. First Offense
  - (1) Visitation privileges suspended as set forth in Section VI.(H)(1)(a)
  - (2) Escalating disciplinary sanctions as set forth in Section VI.(H)(4)(a)
  - (3) Written warning
  - (4) Suspension from substance abuse program for thirty (30) days
  - (5) Individual weekly counseling sessions with the substance abuse program staff
  - (6) Written assignments.
- b. Second and Subsequent Offenses (within eighteen (18) months of the first offense). All sanctions for the second or subsequent offense shall run consecutively to any similar sanction for the first offense.
  - (1) Visitation privileges suspended as set forth in Section VI.(H)(1)(b)
  - (2) Escalating disciplinary sanctions as set forth in Section VI.(H)(4)(b) for consecutive second offense and Section VI.(H)(4)(c) for third or subsequent offenses
  - (3) Program discharge for ninety (90) days
6. Treatment staff shall conduct a hearing within the treatment program to present the details of the offense and issue treatment sanctions. Treatment staff shall record all imposed treatment sanctions on CR-1832, Disciplinary Report. The CR-1832 shall be reviewed and signed by a TDOC employee and placed in the inmate's treatment file for record keeping purposes only. Each warden shall develop procedures for imposing treatment sanctions within their respective institution. An inmate has seven (7) calendar days to dispute or appeal any program imposed treatment sanction. All appeals shall be submitted in writing to the warden.

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7. The disciplinary board shall forward the names of all inmates who test positive on an institutional drug screen to the institutional substance abuse treatment coordinator for tracking and appropriate treatment intervention.
8. Inmates who refuse to participate in a treatment program shall sign a statement to that effect. If the inmate refuses to sign the statement, the treatment counselor and a staff witness shall sign, in the presence of the inmate, that the inmate refused to participate in a treatment program.
9. The warden has the discretion to cancel an inmate's suspended visitation restrictions and reinstate visitation privileges or any other imposed sanction provided the inmate has met all of the following conditions:
  - a. Completed a written request to the warden for reinstatement of privileges
  - b. Enrolled and is actively participating in an institutional substance abuse education (first offense only) or treatment program
  - c. Submitted to monthly urinalysis testing
  - d. No positive urinalysis tests during the last three (3) months.
10. Any inmate that tests positive on a drug screen who has been approved for parole shall be referred to the institutional parole officer for a parole recission hearing. The names of inmates that test positive on a drug screen that have a pending parole hearing or decision shall be referred to the institutional parole officer for review.
11. The Board of Probation and Parole, at its discretion, may deny or rescind, if known or anticipated, the release of any inmate who tests positive for drug use.

I. Investigation and Reports:

1. Each institution shall submit to the Director of Substance Abuse Programs a monthly summary of all substance abuse testing and interdiction activities. This report shall be due in central office no later than the tenth working day of the month. The report shall include the following information:
  - a. Number of inmates drug tested during the month (by test type)
  - b. Number and type of disciplinary sanctions imposed for positive drug screen
  - c. Number and type of treatment program sanctions imposed for positive drug screen
  - d. Number of interdiction activities conducted, including but not limited to, institutional searches, vehicle searches, and parking lot searches

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- e. Number of drug related arrests (visitors, employees, vendors, etc.)
2. All positive drug or alcohol tests of inmates not assigned to a substance abuse program shall be entered on TOMIS conversation LIBS and shall cause an inquiry to be conducted by designated institutional staff to determine how the drugs/alcohol were introduced into the institution. The warden may request assistance from the Director of Internal Affairs.
3. In addition to drug testing inmates, the warden may employ other drug detection methods to enforce the department's zero drug tolerance policy. Other drug detection methods shall include, but not be limited to:
  - a. Random and routine searches of inmates, employees, visitors, department facilities, inmate housing units, visitors' and employees' vehicles, inmate property, and inmate mail. (See Policy #506.06.)
  - b. Monitoring inmate telephone calls
  - c. Employee orientation and training regarding the presence and use of drugs in the workplace
  - d. Where available, the use of narcotic detection canines
  - e. Ion Trap Mobility Spectrometers
4. The quarterly report from each institution will reflect information related to drug testing in the format provided by the Deputy Commissioner. (See Policy #103.01.)
5. The Director of Substance Abuse Programs shall compile, on a quarterly basis, a summary by institution and program of the program-related drug testing. This summary report shall be submitted to the Assistant Commissioner of Operations, who shall review and forward the information to the Deputy Commissioner.

VII. ACA STANDARDS: 3-4388.

VIII. EXPIRATION DATE: August 1, 2006.



## TENNESSEE DEPARTMENT OF CORRECTION

## DISCIPLINARY REPORT

NO: \_\_\_\_\_

INSTITUTION \_\_\_\_\_

TRANS CODE (2 Char.) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	LOCATION & DOC NBR (7 Characters) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	INFRACTION DATE MO DAY YR <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	INFRACTION TIME <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
OFFENDER NAME (LAST) (14 Characters) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		OFFENDER NUMBER (6 Characters) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
FIRST _____ MI _____		<div style="border-bottom: 1px solid black; margin-bottom: 5px;">LAST NAME _____</div> <div style="display: flex; justify-content: space-between;"><div>First _____</div><div>MI _____</div></div> <div style="display: flex; justify-content: space-between;"><div>Title _____</div><div>Shift _____</div></div>	
INFRACTION TYPE (2 Char.) VIOL. REPORTING OFFICIAL TYPE (1 Char.)			
1 2 3 4 <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div><div style="border: 1px solid black; width: 20px; height: 20px;"></div></div>			
PREPARED BY _____ DATE _____		AUTHORIZED BY _____ DATE _____	
ENTERED BY _____ DATE _____		VERIFIED BY _____ DATE _____	

## -----OFFENSE-----

- |                              |                            |  |
|------------------------------|----------------------------|--|
| 1. Arson                     | 17. Furlough Violation     | 33. Refused Direct Order   |
| 2. Assault                   | 18. Gambling/Gaming        | 34. Sexual Misconduct  |
| 3. Attempted Escape          | 19. Horseplay              | 35. Strong-armed Activity  |
| 4. Burglary                  | 20. Inhalants              | 36. Strong-armed Robbery Threatening   |
| 5. Contraband                | 21. Intoxicated-Drugs      | 37. Threatening Employee   |
| 6. Destroying State Property | 22. Intoxicants-Alcohol    | 38. Threatening Inmate   |
| 7. Disrespect                | 23. Intoxicants-Possession | 39. Refused to Participate   |
| 8. Drinking                  | 24. Intoxicants-Selling    | 40. Late Returning   |
| 9. Drugs-Possession          | 25. Larceny                | 41. In Unauthorized Location   |
| 10. Drugs-Selling            | 26. Mutilation             | 42. Failure to Turn in Earnings  |
| 11. Escape                   | 27. Out of Place           | 43. Falsifying, Altering, or Forgoing a Name on an Official Document or Record |
| 12. Extortion                | 28. Participating in Riot  | 44. Operating Unauthorized Vehicle   |
| 13. Fighting                 | 29. Poss. Free World Money | 45. Making Unauthorized Financial Obligation or Transaction                    |
| 14. Forgery                  | 30. Poss. Deadly Weapon    | 46. Other  |

Details of Offense: \_\_\_\_\_

Full name, number and location of witnesses: \_\_\_\_\_

Unit Assignment: \_\_\_\_\_

Inmate Name: \_\_\_\_\_

Job Assignment: \_\_\_\_\_

Description and disposition of all evidence seized and any tests given:

Custody location of inmate pending hearing:

If placed in segregation:

\_\_\_\_\_  
Signature of Senior Security Officer

\_\_\_\_\_  
Date and Time

\_\_\_\_\_  
Signature of Warden  
(Segregation pending investigation)

\_\_\_\_\_  
Date and Time

I have been given a copy of this report and have been told about my limited right to remain silent and to be represented by an inmate advisor.

\_\_\_\_\_  
Inmate Signature

\_\_\_\_\_  
Date and Time

Inmate was given copy of report and advised of rights, but refused to sign report.

\_\_\_\_\_  
Employee's initials, if reporting employee, otherwise full name.

\_\_\_\_\_  
Date and Time

\_\_\_\_\_  
Signature of Reporting Employee.



TENNESSEE DEPARTMENT OF CORRECTION

AUTHORIZATION FOR RELEASE OF HEALTH CARE/SUBSTANCE ABUSE TREATMENT INFORMATION

INSTITUTION \_\_\_\_\_

Inmate Name \_\_\_\_\_ TDOC Number \_\_\_\_\_ Sex \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

I, \_\_\_\_\_ authorize \_\_\_\_\_  
(Inmate's Name) (Name of specific person, including title, or organization)

to release to \_\_\_\_\_

\_\_\_\_\_  
(Name of specific person, including title, or organization)

health care/substance abuse treatment records or information concerning my treatment for the following purpose:

I, the undersigned, authorize release of information covering services from \_\_\_\_\_ to \_\_\_\_\_

Specific Information Requested (*Check all that apply*):

_____ Physical Health Records (specify type):	_____ Other (Specify type):
_____ _____	_____ _____
_____ _____	_____ _____
_____ Psychiatric Records	_____ Psychological Records
_____ Mental Health Program Records	_____ Alcohol and Other Substance Abuse Records*
_____ Results of any testing/treatment for HIV-positive antibodies/acquired immune deficiency syndrome/sexually transmitted disease(s)	

I understand that there will be a reasonable fee charged for these copies according to Tennessee law.

**Expiration date:** This authorization expires six months from the date of signature below and covers information only prior to that date. I understand that I may withdraw this consent at any time. I also understand that any release which has been made prior to my revocation and which was made in reliance upon this authorization shall not constitute a breach of my right to confidentiality. I also understand that the information released cannot be redisclosed by person(s), institution(s), named above unless I specifically authorize such a release in writing.

\*I also understand that any disclosure of records concerning diagnosis and/or treatment of alcohol and/or drug abuse is covered by Title 42 CFR, and if there is any such information, I **do** \_\_\_\_; I **do not** \_\_\_\_ authorize the release of information.

I hereby release the provider or facility releasing this information upon my authorization from any liability:

\_\_\_\_\_  
(Inmate or person legally authorized to consent for minor or for person unable to sign)



\_\_\_\_\_  
(Relationship to Inmate)

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

Authorization must be signed by the inmate. If the inmate is under 18 years of age or is not legally competent or is unable to sign, the parent or designated conservator must provide authorization.

**NOTICE TO PERSON OR AGENCY RECEIVING THIS INFORMATION:** This information has been disclosed to you from records for which confidentiality is protected (Title 42 CFR Part 2). Laws and regulations prohibit you from making further disclosure of it without the specific consent of the person to whom it pertains. A general authorization for release of medical or other information is not sufficient. (Title 42 CFR Part 2 pertains specifically to substance abuse treatment information.)

 <p>ADMINISTRATIVE POLICIES AND PROCEDURES State of Tennessee Department of Correction</p>	Index #: 506.21	Page 1 of 1
	Effective Date: July 1, 2004	
	Distribution: B	
	Supersedes: N/A	
<p>Approved by: </p>		
Subject: INMATE DRUG/ALCOHOL TESTING AND SANCTIONS		

POLICY CHANGE NOTICE 04-51


INSTRUCTIONS:

Please add to Section VI.(A)(3) to read as follows and reletter remaining subsections:

“d. Assistant Commissioner of Rehabilitative Services”

Please change Section VI.(I)(5) to read as follows:

“5. The Director of Substance Abuse Programs shall compile, on a quarterly basis, a summary by institution and program of the program-related drug testing. This summary report shall be submitted to the Assistant Commissioners of Operations and Rehabilitative Services. The Assistant Commissioner of Rehabilitative Services shall review and forward the information to the Deputy Commissioner.”

 <p>ADMINISTRATIVE POLICIES AND PROCEDURES State of Tennessee Department of Correction</p>	Index #: 506.21	Page 1 of 1
	Effective Date: May 1, 2004	
	Distribution: B	
	Supersedes: N/A	
Approved by:		
Subject: INMATE DRUG/ALCOHOL TESTING AND SANCTIONS		

POLICY CHANGE NOTICE 04-29

INSTRUCTIONS:

In Section VI.(E)(6), please eliminate the phrase “and #9502.01 for privately managed facilities.”

In Sections. VI.(H)(1), (H)(4)(b)(5), and (H)(4)(c)(5), eliminate the phrase “and #9502.02 for privately managed institutions.”

Please change Section VI.(H)(b) and (c) to read as follows:

- “b. Subsequent offenses – Visits shall be suspended for additional six-month periods.
- c. Continued violations after 12 months of visitation restrictions shall be addressed in accordance with Policy #507.01.”

Please change Section VII. to read as follows:

“VII. ACA STANDARDS: 4-4437.”